

08-29-01

A
06/27/01
09/940698 PTO**UTILITY PATENT**Attorney Docket **APPLICATION** 2132.022TRANSMITTAL FIRST NAMED INVENTOR OR
APPLICATION IDENTIFIER

for nonprovisional applications under 37 CFR 1.53(b) Inventor Jackowski et al.

TITLE: Method For Diagnosing and Distinguishing Traumatic Brain Injury and Diagnostic Devices for Use Therein

EXPRESS MAIL LABEL NO.: ET479400564US Date submitted: 08/27/01

APPLICATION ELEMENTS

(See MPEP chapter 600 concerning utility patent appln.)

Commissioner for Patents

Box Patent Application

Washington, D.C. 20231

1. Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)

2. Specification 43 Total Pages
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. Drawing(s) (35 USC 13) 1 New Sheets

4. Decl./Pow. of Att. 3 sheets

- a. Combined Executed (original or copy) for C-I-P application
- b. Copy from a prior appln. (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)

[Note Box 5 Below]

I. Deletion of Inventor(s)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)

5. Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the Oath or Declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
 Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

18. **CORRESPONDENCE ADDRESS** Customer Number or Bar Code Label Cust #21917
 Correspondence address below

NAME: Ferris H. Lander

McHale & Slavin, P.A.

ADDRESS: 4440 PGA Blvd., Suite 402

CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410

COUNTRY: U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572

SEND TO: Box Patent Application, Commissioner for Patents, Washington, DC 20231

Express Mail Label ET479400564US

FEE TRANSMITTAL for FY2001

Date: 08/27/01

Total Amount DUE: \$

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge the filing fees and any additional fees to:

Deposit:

Account No. _____

Deposit

Account Name: _____

Charge any additional Fee required under 37 CFR 1.15 and 1.17 Applicant claims small entity status. See. 37 CFR

2. Payment Not submitted

Check Money Order Other

FEE CALCULATION

1. FILING FEE

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	<u>355</u>
106	320	206	160	Design filing fee	_____
107	490	207	245	Plant filing fee	_____
108	710	208	355	Reissue filing fee	_____
114	150	214	75	Provisional filing fee	_____
				SUBTOTAL(1)	\$355.00
				Fee from	

2. CLAIMS

Extra below Fee Paid

Total Claims 37 - 20 = -17 x 9 = \$153.

Independent 4 - 3 = -4 x 40 = \$ 40.

Multiple Dep 0 x = \$ -0-

Claims

Large Entity	Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)

Large Entity	Small Entity								
Fee Code	Fee (\$)	Fee Code	Fee (\$)						
103	22	203	9	Claims in excess of 20	146	710	246	355	Filing a Submission After Final rejection (37 CFR .129(a))
102	82	202	40	Ind. Claims in excess of 3	149	710	249	355	For each addnl. invention to be examined (37 CFR 1.129(b))
104	270	204	135	Mult. Dependent claim					
109	80	209	40	Reissue Independent Claims over Original Patent					Other fee (specify) _____
110	18	210	9	Reissue Claims in excess 20 and over original patent					

FEE SUBTOTAL(2) \$ 548.00 *Reduced by Basic filing fee **SUBTOTAL(3)** _____

SUBMITTED BY: Ferris H. Lander

Typed or printed Name: Ferris H. Lander

Signature: Ferris H. Lander Reg. No. 43,377

Date: 08/27/01 Dep. Acct.: _____

Application Number : N/A
 Filing Date : N/A
 First Named Inventor : Jackowski et al.
 Group Art Unit : N/A
 Examiner Name : N/A
 Attorney Docket No. 2132.022

FEE CALCULATION (continued)

3. ADDITIONAL FEES:

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)		<u>FEE DESCRIPTION</u>
105	130	205	65		Surcharge - late filing fee/oath
127	50	227	25		Surcharge - late provisional filing fee or cover sheet.
139	130	139	130		Non-English specification
147	2520	147	2520		For filing a Request. for Exam.
112	920*	112	920*		Req. publication of SIR prior Examiner Action
115	110	215	55		Extension - first month
116	390	216	195		Extension - second month
117	890	217	445		Extension - third month
118	1390	218	695		Extension - fourth month
128	1890	228	945		Extension - fifth month
119	310	219	155		Notice of Appeal
120	310	220	155		Brief in support of Appln.
21	270	221	135		Req. for Oral Hearing
138	1510	138	1510		Petition to Institute Public Use Proceeding
140	110	240	55		Pet. to revive - unavoidable
141	1240	241	620		Pet. To revive - unintentional
142	1240	242	620		Utility Issue Fee
143	440	243	220		Design Issue Fee
144	600	244	300		Plant Issue Fee
122	130	122	130		Petitions to Commissioner
123	50	123	50		Petitions re: Provisional
126	180	126	180		Sub. Of Infor. Discl. Stmt.
581	40	581	40		Record. Patent Assign. Per property
146	710	246	355		Filing a Submission After Final rejection (37 CFR .129(a))
149	710	249	355		For each addnl. invention to be examined (37 CFR 1.129(b))